



Response to Intervention Team Referral Form

Student: (Last, First)	Grade/Age	Student ID	Personal Making Referral	Initial Meeting Date:
Parent/Guardian	Contact #	Alt Contact #	Email	Follow Up Meeting Date:

Student Strengths *CATA	Areas of Concern *CATA	Tier I Interventions *CATA
<input type="checkbox"/> Accepts and takes responsibility <input type="checkbox"/> Has friends <input type="checkbox"/> Places value on helping others <input type="checkbox"/> Cares about school <input type="checkbox"/> Shows empathy, sensitivity <input type="checkbox"/> Tells the truth <input type="checkbox"/> Extracurricular activities <input type="checkbox"/> Optimistic about his/her future <input type="checkbox"/> Resist negative peer pressure <input type="checkbox"/> Positive relationship with adults <input type="checkbox"/> Completes assignments timely <input type="checkbox"/> Actively participates in class <input type="checkbox"/> Works well independently <input type="checkbox"/> Other: _____	<input type="checkbox"/> Academic: _____ <input type="checkbox"/> Attendance: _____ <input type="checkbox"/> Emotional/Behavior: _____ <input type="checkbox"/> Family/Home: _____ <input type="checkbox"/> Medical: _____ <input type="checkbox"/> Other: _____	<input type="checkbox"/> Reteach expectations <input type="checkbox"/> Reflective listening <input type="checkbox"/> Differentiation <input type="checkbox"/> Proximity <input type="checkbox"/> Planned discussion <input type="checkbox"/> Parent conference <input type="checkbox"/> Adjusted workload <input type="checkbox"/> After School Program <input type="checkbox"/> Tutoring <input type="checkbox"/> Other: _____ Describe results: _____ _____ _____

Student Profile						
	BOY	MOY	EOY	Screening	Date	Status
Literacy Level				Vision		
Math Level				Hearing		
# of days Absent (unexcused)			# of days Absent (excused)		# of times/days suspended	
	Intervention Plan		What specific academic or behavior data will be collected?		How often will data be collected?	When, during the day, will the data be collected?
1						
					Case Manager	Where will data be collected?
	Intervention Plan		What specific academic or behavior data will be collected?		How often will data be collected?	When, during the day, will the data be collected?
2						
					Case Manager	Where will data be collected?
	Intervention Plan		What specific academic or behavior data will be collected?		How often will data be collected?	When, during the day, will the data be collected?
3						
					Case Manager	Where will data be collected?

Attendee/Position	Attendee/Position
Attendee/Position	Attendee/Position
Attendee/Position	Attendee/Position

*CATA: Check All That Apply



Attachment B2: Potential Intervention List

DRAFT



Intervention Discussion Template

Interventions are progressive, a tier 1 can become a tier 2 if necessary; groups become smaller and more intense

Academic Concerns		Tier 1 strategies		Tier 2 strategies	
Failing Core Subject		Praise (written or Verbal)		Note Taking Strategies	
Reading Fluency		Word Bank		Organization Strategies	
Reading Comprehension		Peer Reading		Burst/LEXIA/Wilson Reading/LLI	
Phonics/Decoding		Modeled Writing		Tools of the Mind	
Phonemic Awareness		Chunking (short sequential steps)		Test Retake	
Punctuation/Spelling/Grammar		Small Group Instruction		ST Math/First in Math	
Sentence/Paragraph Development		Parallel Curriculum		verbal rehearsal	
Vocabulary Development		Computer Based Instruction		Extended Literacy Block	
Does not complete homework		Flexible Grouping		Pull Out/Push In	
Organization		Repeated Direction		Audio Book	
Math Fluency		Alternative Assignments		Extended Time	
Place Value		Differentiation		Prep students before questioning	
Addition/Subtraction		Graphic Organizer		Reduce Distraction	
Multiplication/Division		Que cards on Desk		After School Instruction/Tutoring	
Geometry/Area/Spatial		Study Guide		OTHER: _____	
Problem Solving		Manipulatives		Tier 3 strategies	
Study Skills		allow breaks		Re-teach step-by-step	
Working Memory (verbal&nonverbal)		Fluency practice drills/sheets		Wilson Reading/other	
Listening Comprehension		Repeated Reading		After School Individual Instruction	
Executive Functions		Multiple Modalities		Reading Specialist	
OTHER: _____		OTHER: _____		OTHER: _____	
Behavioral Concern		Tier 1 Strategies		Tier 2 strategies	
makes verbal threats		Praise (written or Verbal)		Office Referral	
tries to intimidate others		PBIS reward system		administrative conference	
refuses to work		reteach expectations		peer mediation	
Challenges/Ignores Authority		reflective listening		KidTalk meeting	
repeatedly hits, kicks or pushes		self monitoring tool		behavior modification program	
demonstrates intense anger		classroom responsibilities		One on One Counseling	
easily provoked		lunch with teacher		seclusion/restraint	
name calls/Instigates		seat assignments		removal from classroom	
Throws Object		choice of consequence		OTHER: _____	
engages others while they working		character development program		Tier 3 Strategies	
makes inappropriate comments		teach/practise expectations		Community Based Organization	
speaks out of Turn		structured lessons		Adjusted Schedule	
values being seen as "tough"		planned discussion		WRAP Care	
does not demonstrate remorse		teach social skills		One on One Counseling	
unconcerned with parental response		Check In - Check Out		Check & Connect	
self destructive/destroys furniture		positive phone call to parent		mentor	
expresses hopelessness/withdrawn		parent contact		504 Plan	
OTHER: _____		OTHER: _____		OTHER: _____	
		other areas of concern			
Attendance		Health and Mental Wellness		Medical	

NOTES: _____



RTI Team Meeting Tier II Follow-Up Meeting Notes

Student Name: _____ **Meeting Date:** _____

RTI Team Members Present at Meeting:

Name	Position/Relationship to Student
Name	Position/Relationship to Student
Name	Position/Relationship to Student
Name	Position/Relationship to Student
Name	Position/Relationship to Student
Name	Position/Relationship to Student

Adjustments:

Goal #1:	Goal #1:
Intervention:	Intervention:
Progress as indicated by data collection:	
Goal #2:	Goal #2:
Intervention:	Intervention:
Progress as indicated by data collection:	
Goal #3:	Goal #3:
Intervention:	Intervention:
Progress as indicated by data collection:	
Additional Support Needed for Teacher or Student:	
Evidence Shows: ___ Student achieved priority goal(s). Teacher will continue to monitor student progress. ___ Intervention(s) partially/not successful. Continue student in Tier 2/ Tier 3 and: ___ Continue Interventions as written in Student Intervention Plan. ___ Adjust Student Intervention Plan. ___ Student is still not making progress. Revisit Intervention Plan.	



RTI Team Meeting
Tier III Follow-Up Meeting Notes

Student Name: _____ Meeting Date: _____

RTI Team Members Present at Meeting:

Name	Position/Relationship to Student
Name	Position/Relationship to Student
Name	Position/Relationship to Student
Name	Position/Relationship to Student
Name	Position/Relationship to Student
Name	Position/Relationship to Student

Adjustments:

Goal #1:	Goal #1:
Intervention:	Intervention:
Progress as indicated by data collection:	
Goal #2:	Goal #2:
Intervention:	Intervention:
Progress as indicated by data collection:	
Goal #3:	Goal #3:
Intervention:	Intervention:
Progress as indicated by data collection:	
Additional Support Needed for Teacher or Student:	
Evidence Shows: ____ Student achieved priority goal(s). Teacher will continue to monitor student progress. ____ Intervention(s) partially/not successful. Continue student in Tier 3/ 504 Plan / Special Education Evaluation ____ Continue Interventions as written in Student Intervention Plan. ____ Adjust Student Intervention Plan. ____ Student is still not making progress. Revisit Intervention Plan.	



RTI Team Letter of Invitation

School Name, Address

Initial Letter of Invite to Parent/Guardian

Date

Dear 'Parent/Guardian Name':

The goal of our school is to ensure that all students are successful learners and high achievers. The purpose of this letter is to inform you that 'Student's Name' continues to have success in 'student's' strength'. However, at this time we are concerned that 'Student's Name' is having difficulty with 'concern – e.g., grades are falling; involved in several fights; does not turn in assignments'.

In an effort to ensure that 'Student's Name' continues to have success in the classroom/school environment, 'he/she' has been referred by 'teacher/staff member name' to the school's RTI Team. The RTI Team, comprised of various school staff members, is a targeted teacher and student support system designed to problem-solve on how we can assist 'Student's Name' to be more successful in school. Teachers, administrators and other school support personnel are members of the team.

As you know, you play an important role in 'Student's Name' education. The school welcomes and respects your input. We would like to invite you to join us as a member of the RTI team to help find ways in which 'Student's Name' can continue being successful in school.

We have tentatively scheduled an RTI meeting on 'date and time' to design a support plan for 'Student's Name'. Please let us know if you are able to attend.

___ I will attend the RTI meeting as scheduled.

___ I will need the following accommodations so that I may attend the RTI meeting:

___ I would prefer to participate by telephone. Please contact me at _____.

___ I will not attend the RTI meeting, but would like a contact from the teacher or team.

___ I would rather come on _____.

___ Please contact me at _____ to reschedule.

Please sign and return this letter to indicate your preference. A stamped self-addressed envelope is attached for your convenience, or you may contact 'me/teacher name' at the 'school number', or by 'email'.

We look forward to hearing from you. Thank you.

Sincerely,

'Name and Position'